#### **Application Data Sheet**

### **Application Information**

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

CD-ROM or CD-R?:: None
Computer Readable Form (CRF)?:: No

Title:: SEATING SYSTEM FOR A VEHICLE

Attorney Docket Number:: 026032-4708

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 3

Small Entity?:: No

Petition included?::

Secrecy Order in Parent Appl.?:: No

#### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Family Name:: Hentges

anny rame..

City of Residence:: Plymouth

State or Province of Michigan

Residence::

Given Name::

Country of Residence:: US

Street of mailing address:: 13991 Ridgewood

William J.

City of mailing address::

Plymouth

State or Province of mailing

MI

address::

Postal or Zip Code of mailing

48170

address::

**Applicant Authority Type::** 

Inventor

**Primary Citizenship Country::** 

US

Status::

**Full Capacity** 

Given Name::

Vasile E.

Family Name::

**Bozinton** 

City of Residence::

**Farmington Hills** 

State or Province of

Michigan

Residence::

**Country of Residence::** 

US

Street of mailing address::

29206 Chelsea Crossing

City of mailing address::

**Farmington Hills** 

State or Province of mailing

MI

address::

Postal or Zip Code of mailing

48331-2806

address::

**Applicant Authority Type::** 

Inventor i

**Primary Citizenship Country::** 

US

Status::

Full Capacity

**Given Name::** 

Tod A.

Family Name::

Shivak

City of Residence::

Ypsilanti

**State or Province of** 

Michigan

Residence::

**Country of Residence::** 

US

Street of mailing address::

3682 Fieldcrest Lane

City of mailing address::

Ypsilanti

State or Province of mailing	MI
address:: Postal or Zip Code of mailing	48197-7465
address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Srinivasa N.
Family Name::	Sanku
City of Residence::	Canton
State or Province of	Michigan
Residence::	
Country of Residence::	US
Street of mailing address::	1454 Bayberry Park Circle
City of mailing address::	Canton
State or Province of mailing	MI
address::	
Postal or Zip Code of mailing	48188-5251
address::	
Correspondence Information	
•	·
Correspondence Customer Nur	mber:: 26371
E-Mail address::	PTOMailMilwaukee@Foley.com
	<b>G</b>
Representative Information	
	( E
Representative Customer	26371
Number::	

## **Domestic Priority Information**

Application:: Continuity Type::		Parent	Parent Filing	
		Application::	Date::	
This Application	An application	60/462,459	11/11/2003	
	claiming the benefit			
	under 35 USC			
÷	119(e)		,	

# Foreign Priority Information

Country::	Application	Filing Date::	Priority Claimed::
	number::		

As	sign	ee Inf	orma	tion

Assignee name::

Johnson Controls Technology Company